

Please type a plus sign (+) inside this box →

+

10-15-01

PTO/SB/05 (08-00)

Approved for use through 10/31/2002. OMB 0651-0032

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**UTILITY  
PATENT APPLICATION  
TRANSMITTAL**

(Only for new nonprovisional applications under 37 C.F.R. § 1.53(b))

Attorney Docket No.	7504-80241
First Inventor	Michael P. McLeod, et al.
Title	Handheld Interpreting Electrocardiograph
Express Mail Label No.	EL854694608US

**APPLICATION ELEMENTS**

See MPEP chapter 600 concerning utility patent application contents

**ADDRESS TO:**

Assistant Commissioner for Patents  
Box Patent Application  
Washington, DC 20231

1. ☒ \*Fee Transmittal Form (e.g. PTO/SB/17)  
(Submit an original and a duplicate for fee processing)

2. ☐ Applicant claims small entity status.  
See 37 CFR 1.27.

3. ☒ Specification (preferred arrangement set forth below)  
- Descriptive title of the invention  
- Cross Reference to Related Applications  
- Statement Regarding Fed sponsored R & D  
- Reference to sequence listing, a table, or a computer program listing appendix  
- Background of the invention  
- Brief Summary of the invention  
- Brief Description of the Drawings (if filed)  
- Detailed Description  
- Claim(s)  
- Abstract of the Disclosure

Total Pages **14**

4. ☒ Drawing(s) (35 U.S.C. 113) Total Sheets **4**

5. ☐ Oath or Declaration Total Pages **2**

a. ☒ Newly executed (original or copy)  
b. ☐ Copy from a prior application (37 CFR 1.63(d))  
(for continuation/divisional with Box 17 completed)

i. ☐ **DELETION OF INVENTOR(S)**  
Signed statement attached deleting inventor(s)  
named in the prior application, see 37 C.F.R.  
1.63(d)(2) and 1.33(b).

6. ☒ Application Data Sheet. See 37 CFR 1.76

7. ☐ CD-ROM or CD-R in duplicate, large table or  
Computer Program (Appendix)

8. Nucleotide and/or Amino Acid Sequence Submission  
(if applicable, all necessary)

a. ☐ Computer Readable Form (CRF)

b. Specification Sequence Listing on:

i. ☐ CD-ROM or CD-R (2 copies); or

ii. ☐ paper

c. ☐ Statements verifying identity of above copies

**ACCOMPANYING APPLICATION PARTS**

9. ☒ Assignment Papers (cover sheet & document(s)) ✓

10. ☐ 37. C.F.R. § 3.73(b) Statement (when there is an assignee) ☒ Power of Attorney

11. ☐ English Translation Document (if applicable)

12. ☐ Information Disclosure Statement (IDS) PTO-1449 ☐ Copies of IDS Citations

13. ☐ Preliminary Amendment

14. ☒ Return Receipt Postcard (MPEP 503)  
(Should be specifically itemized)

15. ☐ Certified Copy of Priority Document(s)  
(if foreign priority is claimed)

16. ☐ Other \_\_\_\_\_

17. If a **CONTINUING APPLICATION**, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

☐ Continuation ☐ Divisional ☐ Continuation-In-Part (CIP) Of prior application No.: \_\_\_\_\_

Prior application information: Examiner \_\_\_\_\_ Group/Art Unit: \_\_\_\_\_

**FOR CONTINUATION OR DIVISIONAL APPS only:** The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

**18. CORRESPONDENCE ADDRESS**

☐ Customer Number or Bar Code Label ☐ (Insert Customer No. or Attach bar code label here) or ☒ Correspondence address below

Name	Jon P. Christensen				
	WELSH & KATZ, LTD.				
Address	120 South Riverside Plaza				
	22nd Floor				
City	Chicago	State	Illinois	Zip Code	60606
Country	U.S.A.	Telephone	(312) 655-1500	Fax	(312) 655-1501
Name Print/Type	Jon P. Christensen			Registration No. (Attorney/Agent)	34,137
Signature				Date	October 12, 2001

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Office, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

# FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision.

## Complete if Known

Application Number	
Filing Date	concurrently herewith
First Named Inventor	McLeod, et al.
Examiner Name	
Group/Art Unit	
Attorney Docket Number	7504-80241

TOTAL AMOUNT OF PAYMENT (\$ 780.00)

### METHOD OF PAYMENT (check one)

1. ☒ The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:

Deposit  
Account  
Number  
Deposit  
Account  
Name

23-0920

WELSH & KATZ, LTD.

- ☒ Charge any Additional Fee Required  
Under 37 CFR. 1.16 and 1.17

2. ☒ Payment Enclosed:  
☒ Check ☐ Credit Card ☐ Money Order ☐ Other

### FEE CALCULATION

#### 1. BASIC FILING FEE

Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	Fee Paid
101	710	201	355	Utility filing fee	740.00
106	320	206	160	Design filing fee	
107	490	207	245	Plant filing fee	
108	710	208	355	Reissue filing fee	
114	150	214	75	Provisional filing fee	

SUBTOTAL (1) (\$ 740.00)

#### 2. EXTRA CLAIM FEES

	Extra Claims	Fee from below	Fee Paid
Total Claims	14	-20** = 0	x =
Independent Claims	1	-3** = 0	x =
Multiple Dependent Claims			=

\*\*or number previously paid, if greater; For Reissues, see below

Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description
103	18	203	9	Claims in excess of 20
102	80	202	40	Independent claims in excess of 3
104	270	204	135	Multiple dependent claim, if not paid
109	80	209	40	**Reissue independent claims over original patent
110	18	210	9	**Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$)

\*\*or number previously paid, if greater; For Reissues, see above

### FEE CALCULATION (continued)

#### 3. ADDITIONAL FEES

Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description
105	130	205	65	Surcharge-late filing fee or oath
127	50	227	25	Surcharge-late provisional filing fee or cover sheet
139	130	139	130	Non-English Specification
147	2,520	147	2,520	For filing a request for reexamination
112	920*	112	920*	Requesting publication of SIR prior to Examiner action
113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action
115	110	215	55	Extension for reply within first month
116	390	216	195	Extension for reply within second month
117	890	217	445	Extension for reply within third month
118	1,390	218	695	Extension for reply within fourth month
128	1,890	228	945	Extension for reply within fifth month
119	310	219	155	Notice of Appeal
120	310	220	155	Filing a Brief in support of an appeal
121	270	221	135	Request for oral hearing
138	1,510	138	1,510	Petition to institute a public use proceeding
140	110	240	55	Petition to revive - unavoidable
141	1,240	241	620	Petition to revive - unintentional
142	1,240	242	620	Utility issue fee (or reissue)
143	440	243	220	Design issue fee
144	600	244	300	Plant issue fee
122	130	122	130	Petitions to the Commissioner
123	50	123	50	Petitions related to provisional applications
126	240	126	240	Submission of Information Disclosure Stmt
581	40	581	40	Recording each patent assignment per property (times number of properties)
146	710	246	355	Filing a submission after final rejection (37 CFR § 1.129(a))
149	710	249	355	For each additional invention to be examined (37 CFR § 1.129(b))
179	710	279	355	Request for Continued Examination (RCE)
169	900	169	900	Request for expedited examination of a design application

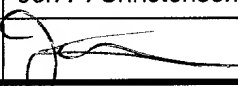
Other fee (specify) \_\_\_\_\_

SUBTOTAL (3)

(\$40.00)

\*Reduced by Basic Filing Fee Paid

### SUBMITTED BY

Name (Print/type) Jon P. Christensen  
Signature 

Registration No. (Attorney/Agent) 34,137

Telephone 312-655-1500

Date Oct. 12, 2001

### Complete (if applicable)

## Certificate of Express Mailing

**Express Mail** mailing label number EL854694608US

Date of Deposit: October 12, 2001

I hereby certify that this paper is being deposited with the United States Postal Service "Express Mail" Post Office to Addressee. Service under 37 CFR 1.10 is on the date indicated above and addressed to: Box Patent Application, Commissioner for Patents, Washington, D.C. 20231. The person mailing this paper is:

Fred Franks

Typed or Printed Name of Person Mailing Paper or Fee

  
Signature of Person Mailing Paper or Fee

099633-10101  
TOTAL RECEIVED